(37 CFR 1.16 (e)) required)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN (37 CFR 1.63) Declaration \boxtimes Submitted OR With Initial Filing (surcharge

Filing

PATENT APPLICATION **Declaration** Submitted after Initial

713072.28 Attorney Docket Number von Dyck, Peter M. First Named Inventor COMPLETE IF KNOWN 09/995,012 Application Number 11/26/01 Filing Date 3761 Group Art Unit Not Yet Known **Examiner Name**

As a below named inventor, I h My residence, mailing address, a	•		name.				
I believe I am the original, first as plural names are listed below) of PAD FOR USE WITH CONTIL	nd sole inventor (if the subject matter	only one name is listed be	elow) or an origina				
		(Title of the Invention)					
the specification of which							
is attached hereto							
OR		as Uni	ited States Applicat	ion Number or PCT International			
was filed on (MM/DD/YY)	11/26/01			(if applicable).			
Application Number 09/995,012		and was amended on (MM/DD/YY)				
I hereby state that I have reviewed amended by any amendment spec			entified specificat	ion, including the claims as			
I acknowledge the duty to disclos continuation-in-part applications, and the national or PCT internation	material niformatir	which became available	between the filing				
I hereby claim foreign priority be certificate, or 365(a) of any PCT America, listed below and have a certificate, or any PCT internation	international applic lso identified below	ation which designated at , by checking the box, an	least one country y foreign applicati	on for patent or inventor's			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached? YES NO			
Availber(s)	Country						
Additional foreign application	numbers are listed	on a supplemental priorit	y data sheet PTO/	SB/02B attached hereto:			
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s	3)	Filing Date (MM/DD/Y	YYY)	dditional provisional application			

[Page 1 of 4]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.

PTO/SB/18 (08-00)

Please type a plus sign whiside this box

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

——————————————————————————————————————	stomer Number Bar Code Label			OR 🖾 (Correspondence address below	
Name Rebecca J. Brandau						
Address Biackweii Sanders Peper Ma	rtin LLP					
Address 720 Olive Street, Suite 2400						
City St. Louis		State Missouri			ZIP 63101	
Country US	Tele	phone 314-34	5-6000		Fax 314-345-6060	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENT	OR:	□Ар	etition has b	een filed	for this unsigned inventor	
Given Name (first and middle [if any]) Peter M			nily Name Surname v	von Dyck		
Inventor's Signature					Date - 9 - 0	
Residence: City Fernandina Beach		State FL Country U.S.		y U.S.	Citizenship U.S.	
2907 Mailing Address 2556 Eastwind Drive						
Mailing Address						
	State EI		71D 2202	14	Country II S	
	City Fernandina Beach State FL ZIP 32034 Country U.S. A petition has been filed for this unsigned					
NAME OF SECOND INVENTOR: Given Name Family Name						
(first and middle [if any]) James G. Inventor's	00	Or	Surname	Schneide		
Signature —		1			Date 11/26/01	
Residence: City Chesterfield		State MO	Countr	y US	Citizenship US	
Mailing Address 14016 Conway Road						
Mailing Address						
City Chesterfield	State MO		ZIP 6301	17	Country US	
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

PTO/SB/04 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE no persons are required to respond to a collection of information unless it contains a valid OMB control number.

UTILITY OR DESIGN PATENT APPLICATION

*	ADDITIONAL SUPPLEME				و څوخو د ۱۳۰۱ و ۱۳۰۱ و ۱۳۰۱	हर्य (क्षेत्र क्षेत्र क	
Attorney Docket Number: 713072.28							
I hereby declare that all statements made belief are believed to be true; and further the like so made are punishable by fine or may jeopardize the validity of the applica	that these statement r imprisonment, or b	ts were ma	de with 18 U.	h the knowledge th	at willful false stat	ements and	
NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor						inventor	
Given Name Nick		Family Name Or Surname Martino			i a talka a abakere.		
Inventor's Signature Mil Martins					Date NOU.	19,2001	
Residence: City Fernandina Beach			State FL Country US		Citizenship US		
Mailing Address 23583 Bahama Point, #1528							
Mailing Address 23583 B	AHAMA P	OINT	, #	<i>+ 1528</i>			
City Fernandina Beach	City Fernandina Beach State FL ZIP 32043 Country US					u du irif4e Tit	
NAME OF FOURTH INVENTOR:					inventor		
Given Name (first and middle [if any]) John S. Family Name Or Surname Minasi, M.I				M.D.			
Inventor's Signature					Date 11-27-	-2001	
Residence: City Amelia Island			State FL Cou		Citizenship US		
Mailing Address 9557 Hildreth Lane							
Mailing Address						-	
City Amelia Island	State FL			ZIP 32034	Country US		
Additional inventors are being name		nental Add	itional	Inventor(s) sheet(s		ached hereto.	

[Page 3 of 4]

PTO/SB/04 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

of Paperwork Reduction of of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

	ADDITIC SUPPL					en en en en else en et promoneligientstation (in en e	
Attorney Docket Number: 713072.28							
I hereby declare that all statements made belief are believed to be true; and further the like so made are punishable by fine of may jeopardize the validity of the applica	that these star	tements nt, or bo	were ma	de wit	h the knowl <mark>ed</mark> ge th	at willful false statements and	
NAME OF FIFTH INVENTOR:						for this unsigned inventor	
Given Name Tung					• v v 10		
Inventor's Signature					Date 11/28/01		
Residence: City St. Louis	Residence: City St. Louis State MO Country US			Country US	Citizenship US		
Mailing Address 1041-L Vantage Court							
Mailing Address							
City St. Louis	State Me	0	-		ZIP 63125	Country US	
NAME OF SIXTH INVENTOR:				A pet	ition has been filed	for this unsigned inventor	
Given Name (first and middle [if any]) Family Name Or Surname				-			
Inventor's Signature		.,				Date	
Residence: City			State		Country	Citizenship	
Mailing Address							
Mailing Address							
City	State				ZIP	Country	
Additional inventors are being name		uppleme	ntal Add				

[Page 4 of 4]